AO 440 (Rev. 12/09) Summons in a Civil Action

UNITED STATES DISTRICT COURT
for the

Eastern District of Texas

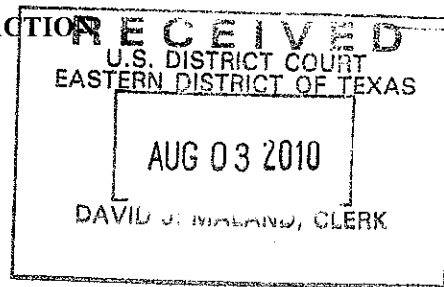|	
ADJUSTACAM LLC *Plaintiff* v. AMAZON.COM, INC., et al. *Defendant*	)))))))) Civil Action No. 6:10-cv-00329

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* BLUE MICROPHONES, LLC
By and through it's registered agent:
ADAM FRASER
1801 CENTURY PARK EAST #520
LOS ANGELES, CA 90067

RECEIVED
U.S. DISTRICT COURT
EASTERN DISTRICT OF TEXAS

AUG 03 2010

DAVID J. MALAND, CLERK

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Andrew W. Spangler
Spangler Law P.C.
208 N. Green Street, Suite 300
Longview, Texas 75601

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: **7/7/10**

David Maland

Signature of Clerk or Deputy Clerk

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Civil Action No. 6:10-cv-00329

PROOF OF SERVICE
(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)*   Blue Microphones, LLC

was received by me on *(date)*   07/22/2010   .

☐ I personally served the summons on the individual at *(place)*

_____   on *(date)* _____ ; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____

_____ , a person of suitable age and discretion who resides there,

on *(date)* _____ , and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* _____ , who is

designated by law to accept service of process on behalf of *(name of organization)* _____

_____   on *(date)* _____ ; or

☐ I returned the summons unexecuted because _____ ; or

☑ Other *(specify):*   Served by Certified Mail, RRR# 7009 2250 0002 8916 9440

My fees are $ _____ for travel and $ _____ for services, for a total of $ 0.00   .

I declare under penalty of perjury that this information is true.

Date: 08/02/2010   *(signature)*

                                                Server's signature

                   Kimberly Murray - Legal Assistant
                           Printed name and title

                   208 N. Green St., Ste. 300
                   Longview, Texas 75601
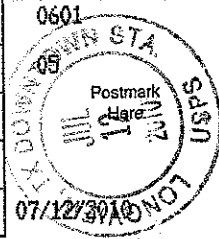
                          Server's address

Additional information regarding attempted service, etc:

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

OFFICIAL USE

LOS ANGELES CA 90067

Postage	$	$2.41
Certified Fee		$2.80
Return Receipt Fee (Endorsement Required)		$2.30
Restricted Delivery Fee (Endorsement Required)		$0.00
Total Postage & Fees	$	$7.51

0601

Postmark Here

07/12/2010

Sent To BLUE MICROPHONES, LLC
By and through it's registered agent:
Street, Apt. No. Adam Fraser
or PO Box No.
City, State, ZIP 1801 Century Park E. #520
Los Angeles, CA 90067

PS Form 3800

7009 2250 0002 8916 9440

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
■ Print your name and address on the reverse so that we can return the card to you.
■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BLUE MICROPHONES, LLC
By and through it's registered agent:
Adam Fraser
1801 Century Park E. #520
Los Angeles, CA 90067

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X _____ ☐ Agent ☐ Addressee

B. Received by (Printed Name)   C. Date of Delivery
                                   7 22 10

D. Is delivery address different from item 1? ☐ Yes
   If YES, enter delivery address below: ☒ No

3. Service Type
☒ Certified Mail   ☐ Express Mail
☐ Registered   ☒ Return Receipt for Merchandise
☐ Insured Mail   ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)   ☐ Yes

2. Article Number
(Transfer from service label)   7009 2250 0002 8916 9440

PS Form 3811, February 2004   Domestic Return Receipt   102595-02-M-1540